Anchie

	USER CHARGE	SELF MONITORING REPO	ORT	APR	1 6	2009
NAME:	TENAX FINISH	ING PRODUCTS, CO.				
ADDRESS:	390 ADAMS STI	REET, NEWARK, NJ 07114		F37		
FACILITY LOCATION:	390 ADAMS STI	REET, NEWARK, NJ 07114		A CONTRACTOR OF THE PARTY OF TH		
NEW CUSTOMER ID/OUT	LET ID: 2	0630001-1 OLD OUTLET I	DESIGNATION:			
MONITORING 3 1 2009 MO DAY YR START Total flow divide DATE BOD MG/L	PERIOD 3 31 2009 MO DAY YR END	VOLUM CU. FT. EFFLUE	TE DISCHARGED X 7.48 = GALLO ENT METER REAL	0,792 GALS		Star

accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

OR AUTHORIZED AGENT	TYPE NAME AND TITLE	TELEPHONE NUMBER
Here a Weil	Jim O'Neill, President	973 589-9000
PVSC FORM MR-2 REV: 3 6/93		4-14=09
	s .	DATE /

Lab Job No: F718

Matrix: WATER

Site: Tenax

QA Batch: 1849

BOD

Lab ID	Client ID	Date Sampled	Date Analyzed	Percent Moisture	DF	Analytical Result Units: mg/l	Reporting Limit Units: mg/l	
988881	LSP-4-031009	03/10/09	03/11/09		1.0	7.2	5.00*	

^{*} Reported RL is adjusted for Dilution Factor and/or Percent Moisture.

^{**} The unadjusted RL for BOD = 5.0 mg/l.

Chain of	Tem	Temperature on Receipt	uo e	Весе	ipt –		1	ı	$\underline{\Psi}$	SS	才	\supset		可	estAmerico	O		-	Na.
TAL-4124 (1007)	Drin	Drinking Water? Yes□	ater?	Yes		<u>}</u> 3			1HE	LEAD	ER	EN	RON	AENT/	THE LEADER IN ENVIRONMENTAL TESTING	TING	4	Frig	i.
Client HALEY AND ALDRICH		Project Manager	je.	10	Ž	SUNILA			GUPTA	10	X		O g	Date 03/10	_	601	Chain of C	Chain of Custody Number	-
RY HIL	•	Telephone Number (Area Code)/Fax Number	nber (Area C	ode)/F	Ja Van	Number 973	1	263-		3900	8	Lab	Lab Number			Page	4	4
PARSIPPANY State Zip Code		Site Contact			<u>187</u>	Lab Contact	g			[₹ (€	alysis re spa	(Attact	Analysis (Attach list if		 		
VEWARK		Carrier/Waybill Number	Numt	je je	,					Aol	`00	ZIN	2000 (1-19-5		(A)		(
Contract/Purchase Order/Quote No. 76080-006	9		Matrix	×	-	Od	ontaii	Containers & Preservatives		18-		BH 19.	CH)	4-776	HAAI (<u></u>	Special instructions/ Conditions of Receipt	ıctions/ Receipt
Sample I.D. No. and Description (Containers for each sample may be combined on one line)	Time	'iA suoeunA	.be2	IIOS	Unpres.	H2SO4	HON	HOBN	N _B N	479	00 314	במין	H4)	@	74.775 10413M				
-1-031009	3/10/2009 12:45	*	- 1				X			Х						ļ		188 881	
LSP-4-031009 3/10/209	02:21 60	1			X		X			Х	× ×		丢		×		,	188 7	
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Precitie Hazard Identification				_	\dashv				\dashv									•	j
Non-Hazard Flammable Skin Initant Poison B	Unknown		Sample Disposal	Sample Disposal Return To Client		ë □	posal	🔲 Disposal By Lab		Archive For	e For		Mor	(/ Months to	i fee me nger thu	ly be as:	sessed if samp nth)	(A fee may be assessed if samples are retained longer than 1 month)	p
Turn Around Time Required 24 Hours 48 Hours 7 Days 14 Days 21 Days		Comer STANDARD	NK	DAI	4	OC R	equire	ments	QC Requirements (Specify)							,			
1. Relinquished By Pub.	Date,	los	Time (O)	Time (O):30		- PB	1. Received	35									3tub	10) t	Time [0:30]
2. Helinquished By U	P(11/28	89	7/ 	e 7.7		F	Seived 3	£ 7									Date	Time	,
3. Relinquished dy	Date		Time	0		6. 100	eceived By	1					3	30.446	l w		Date	Time	
Comments							†						1						
DISTRIBUTION: WHITE - Returned to Client with Benort CANARY - Stells with the Semale: Bit.	one with the Com	NIO : OIN	7. 110	14 Con	١,									İ					

F718

TestAmerica Edison